



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	William E. Sobel	Examiner:	Laurel L. Lashley
Application No.:	10/666,843	Art Unit:	2132
Filed:	September 19, 2003	Docket No.:	SYMAP033
Title:	PREVENTING NETWORK DISCOVERY OF A SYSTEM SERVICES CONFIGURATION		

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to:
Commissioner for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria, VA
22313-1450 on:

March 10 2007.

V. Pula

Veronica Pula

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL FILED WITH AMENDMENT B

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Submission required under 37 CFR §1.114

a. Previously submitted:

Consider the amendment(s)/reply under 37 CFR §1.116 previously

filed on _____

Consider the arguments in the Appeal Brief or Reply Brief previously

filed on _____

Other _____

b. Enclosed:

Amendment/Reply

Affidavit(s)/Declaration(s)

Information Disclosure Statement (IDS), PTO SB/08 & One (1) Copy

of a cited reference.

Other

c. Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below.

				Small Entity		Large Entity	
				Rate	Fee	Rate	Fee
RCE FILING FEE				x \$395 = \$		OR	x \$790 = \$
CLAIMS	After RCE	*HP	Extra				790.00
Total	20	20		x \$25 = \$		OR	x \$50 = \$
Independent	3	3		x \$100 = \$		OR	x \$200 = \$
Multiple Dependent Claims		-0-		x \$180 = \$		OR	x \$360 = \$
<i>*HP = Highest previously paid</i>				TOTAL FEES \$		TOTAL FEES \$	790.00

2. Miscellaneous:

a. Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months.

b. Other _____

3. Applicant hereby petitions for an extension of time as follows:

	SMALL ENTITY		LARGE ENTITY	
	Rate	Add'l Fee	Rate	Add'l Fee
<input type="checkbox"/> Extension for Response within FIRST month	x \$60 = \$		OR	x \$120 = \$
<input type="checkbox"/> Extension for Response within SECOND month	x \$225 = \$		OR	x \$450 = \$
<input type="checkbox"/> Extension for Response within THIRD month	x \$510 = \$		OR	x \$1020 = \$
<input type="checkbox"/> Extension for Response within FOURTH month	x \$795 = \$		OR	x \$1590 = \$
<input type="checkbox"/> Extension for Response within FIFTH month	x \$1080 = \$		OR	x \$2160 = \$

4. Applicant(s) hereby petition that any additional required extension of time be granted.

5. Enclosed is our Check No. _____ in the amount of \$ _____ to cover the RCE Fee required under 37 CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees.

6. Please charge Deposit Account No. 50-0685 (SYMAP033) in the amount of \$790.00 to cover the Request for Continued Examination fee .

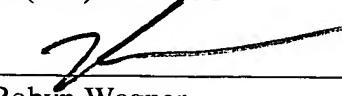
7. If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (SYMAP033).

8. Applicant Initiated Interview Request Form.

9. Please continue to send correspondence to the following address:

CUSTOMER NO. 21912
VAN PELT, YI & JAMES LLP
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Date: 3/30/2007


Robyn Wagner
Reg. No. 50,575